

* STATE OF RHODE ISLAND • AND PROVIDENCE PLANTATIONS • Office of the Secretary of State

Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401 222.3040

PROFIT	CORPORATI	ON	ANNUAL R	EPORT	FOR	THE	YEAR	2005
Filing Period:	January 1 - March 1	•	Filing Fee: \$50.00					

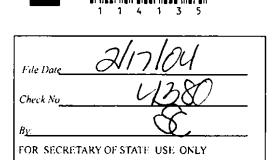
ruing reriou: Junuary 1 -		ig ree: \$50.00			
(FORM MUST BE TYPED IN B			·		
1 Corporate ID No	2. Name of Corporation			2	
114135	T & C Woodwo	rking, inc.			
3 Street Address Principal Busin			Cuy	State	Zip
60 MINERAL SPRING	AVENUE		PAWTUCKET	RI	02860-
4 Business Phone No		5. State of Incorporation		· - ·	6. SIC Code
4017289663		RHODE ISLAND			0414
7. Brief Description of the Chara TO PERFORM ALL TYPES	cter of Rusiness Conducts OF CARPENTRY V	ted in Rhode Island HORK		<u></u>	-
8. NAMES AND ADDRESS	ES OF THE OFFICE	ERS ("X" BOX FOR ATTA	ACHMENT) FILL IN SPACES	S BEFORE USING ATTAC	CHMENTS
rresident Name			Vice President Name		
FERDINANDO G. MONI	<u> </u>		FERDINANDO G. MONI	.Z	
!			Street Address		-
9 WOODSIDE AVENUE		_	9 WOODSIDE AVE		
City	State	Zip	City	State	Zp
CUMBERLAND	IRI	02864	• CUMBERLAND	RI	C2864
Secretary Name	_		Treasurer Name	• • • • • • •	
FERDINANDO G. MONI	Z		FERDINANDO G. MONI	Z	
Street Address			Street Address		
9 WOODSIDE AVE			.9 WOODSIDE AVE		
City	State	Zip	Cay	State	Zip
CUMBERLAND	RI	02864	CUMBERLAND	RI	02864
9. NAMES AND ADDRESS	ES OF THE DIRECT	TORS ("X" BOX FOR AT	TACHMENT) 🔲 FILL IN SPAC		
Director Name			Director Name	ES DE ONE OSMO AT IA	Children 13
.FERDINANDO G. MONI	Z		•		!
Street Address		• •	Street Address		
9 WOODSIDE AVENUE			* Sireel Madress		,
* , . =	in.	15.	:		
City:	'State	¹ Zip	City	State	Zip
CUMBERLAND	RI	02864			
Director Name			Director Name		
					1
Street Address			Street Address]
et in the	· c				
(City	State	.Zip	City	State	Zip
· • •				:	i
10. SHARES AUTHORIZE	D ("X" BOX FOR ATT	ACHMENT) 🗌	11. SHARES ISSUED ("X" BO	X FOR ATTACHMENT) \square	\ ⁻
AUTHORIZEDSHARES	. <u> </u>		ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
600 NO PAR VALUE			100		NO PAR
	·		.	• • • • · · · · · · · · · · · · · · · ·	;
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	.				<u>i</u>
This report must be signed	l in ink by either th	he President, Vice Pre	sident, Secretary, Assistant	Secretary, Treasurer,	Receiver or Trustee
RI ILERI IION BIBRI	 				
######################################					
ar iraan inant dear ar)				
1 1 4	1 3 5		Under penalty of perjury,	I declare and affirm that I	have examined
		_	this report, including any a	accompanying schedules:	and statements,
114135 DBC 02/Q2/05	12:01:16 PM		and that all statements cor	itained herein are true and	l correct.
File Date	15-05	4	to a	014.	
The Duit	2 / /2		Here ingual	O. Williams	<u> </u>
Check No 50	410		Signature of Officer il	(
	3 .		FERMINANDO (J. MONIZ	
$B_{Y'}$		_	Print or Type Name of Office	<i>-</i>	
	ice and a		Trodidont		
FOR SECRETARY OF STATE 1	אטר טארג		Title of Officer	· · ·	Form 630 12/01

Matthew A. Brown, Secretary of State
Corporations Division
orth Main Street, Providence, RI 02003-1335

100 North Main Street, Providence, RI 02903-1335 401.222 3040

PROFIT COR		ANNUAL REPO	ORT FOR THE	YEAR 2004	
FORM MUST BE TYPED I I Corporate ID No. 114135	IN BLACK) 2 Name of Corpo	-	•		
3. Street Address Principal E		DWORKING, INC.	. Z. V.	1.677	
60 MINERAL SPRI			City	State	Ζiρ
4 Business Phone No	NG AVENUE	5. State of Incorporation	PAWTUCKET	RI	, 02860
(401) 728-9663		RHODE ISLAND			6 SIC Code 0414
7 Brief Description of the C TO PERFORM ALL T		ducted in Rhode Island			0414
8. NAMES AND ADDR President Name	ESSES OF THE OF	FICERS ("X" BOX FOR AT		PACES BEFORE USING A	TTACHMENTS
FERDINANDO G. M	OMT 2		Vice President Name FERDINANDO G. 1	AONT 7	
Street Address	JN12		Street Address	ION 1 Z	
9 WOODSIDE AVEN	IF.		9 WOODSIDE AVE	VE IE	
Čuv	State	Zip	City		
CUMBERLAND	RI	02864	CUMBERLAND	'State RI	21p 02864
Secretary Name		02004	Treasurer Name		
FERDINANDO G. MO	ONIZ		FERDINANDO G. M	ONIZ	
Street Address	•	•	Street Address		<u>.</u>
9 WOODSIDE AVENT	JE		9 WOODSIDE AVEN	ΠŒ	
City	State	Zip	Ĉitv	State	Zip
CUMBERLAND	RI	02864	CUMBERLAND	RI	02864
9. NAMES AND ADDR Director Name	ESSES OF THE DIR	ECTORS ("X" BOX FOR A	TTACHMENT) TELL IN Director Name	SPACES BEFORE USING	ATTACHMENTS
FERDINANDO G. MO	SINC				
Street Address			Street Address	•	1
9 WOODSIDE AVENU	JE				
Cuy	State	Zip	City	State	Zip
CUMBERLAND	RI	02864	·		•
Director Name			Director Name		
Street Address			Street Address		•
City	State	Zıp	City	State	Zip
10. SHARES AUTHOR	IZED ("X" BOX FOR	ATTACHMENT) 🗌		(" BOX FOR ATTACHMEN	7) 🛘
AUTHORIZED SHARES Number of Shares	Class/Series	Par Value	ISSUED SHARES Number of Shares	Class/Series	Par Value
600 NO PAR VALUE			100		NO PAR
			•		

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee





(FORM MUST BE TYPED IN BLACK)

Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003
Filing Period: January 1 - March 1 • Filing Fee: \$50.00

I. Corporate ID No	2. Name of Cor	rporation			
114135		ODWORKING			
3. Street Address Principal	~		City	State	Zıp
60 MINERAL SPR	ING AVENUE	****	PAWTUCKET	R.I.	02860
4 Business Phone No. (401) 728-9663		5. State of Incorpora RHODE ISLAN			6. SIC Code
7. Brief Description of the C TO PERFORM ALL T	Character of Business C YPES OF CARPEN	onducted in Rhode Island TRY WORK			
8 NAMES AND ADDE	DESCENDE OF THE O	EFICEDS AVERAY FOR		:	
President Name	resers of the o	LLICERS ("X" ROX LOK	ATTACHMENT) FILL IN SE	PACES BEFORE USING	ATTACHMENTS
FERDINANDO G. M	ONIZ		FERDINANDO G. I	MONIZ	
Street Address			Street Address		
9 WOODSIDE AVEN	IUE		. 9 WOODSIDE AVE	NUE	
City	State	Zip	City	State	Zip
CUMBERLAND	R.I.	02864	EAST PROVIDENCE	Ε ¡R.I.	02864
Secretary Name	• • • • • • • • •	• • • • • • • • • • • • •	Treasurer Name		· · · · · · · · · · · · · · · · · · ·
FERDINANDO G. M	ONIZ		FERDINANDO G. N	MONIZ	
Street Address			Street Address		
9 WOODSIDE AVEN	UE		.9 WOODSIDE AVEN	√UE	
City	State	Zip	Cuy	State	Zip
CUMBERLAND	R.I.	02864	CUMBERLAND	R.I.	02864
9. NAMES AND ADDI	RESSES OF THE D	IRECTORS ("X" BOX FO	RATTACHMENT) FILL IN	SPACES BEFORE USIN	GATTACHMENTS
Director Name			Director Name		
FERDINANDO G. M	ONIZ		FERDINANDO G. 1	MONIZ	
Street Address	-		Street Address		
9 WOODSIDE AVEN	UE		9 WOODSIDE AVE	NUE	
City	State	Zip	•Cuy	State	Zip
CUMBERLAND	R.I.	02914	CUMBERLAND	R.I.	02864
Director Name FERDINANDO G. M	ONIZ	· · · · · · · · · · · · · · · · · · ·	Director Name FERDINANDO G. N	MONIZ	
Street Address	·		Street Address		
9 WOODSIDE AVEN	UE		9 WOODSIDE AVEN	พย	
City	State	Zip	.City	State	Zip
CUMBERLAND	R.I.	02864	CUMBERLAND	R.I.	02864
10. SHARES AUTHOR	IZED ("X" BOX FO	RATTACHMENT)	11. SHARES ISSUED ("X	" BOX FOR ATTACHMI	ENT) [
AUTHORIZED SHARES		, 	JISSUED SHAKES	· · · · · · · · · · · · · · · · · · ·	·
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
600 NO PAR VALUE	:		100		NO PAR
 		d d D dd D	Dunidant Commence 400		
This report must be sign	gned in ink by eit	her the President, Vice	President, Secretary, Assi.	stant Secretary, Trea	surer, Receiver or Trustee
			Linder penalty of per	rjury, I declare and affin	m that I have examined
				g any accompanying sch	
				nts contained herein are	
	1-100		1	e al c	/ /
File Date a	(17/03	<u> </u>	Mudmande	15. Mary	1/31/03
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	·/ / /		Signature of Officer		Date
Check No. O	1343		FORDINAND	10 G. MONIZ	
	À.		Print or Type Name of	Officer	
B <u>y:</u>	_XII	_	The same		
FOR SECRETARY OF STA	ATE USE ONLY		Title of Oilleer	<u> </u>	Form 630 12/01
L					Com 0.0 (2/0)

Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence. RI 02903-1335 401-222-3040





. Corporate ID No.) IN BLACK)				
	2. Name of Corporation		 	· ··- · —	
114135	T & C Woodworl	ding, Inc.			
. Street Address Principal	Business Office		City	State	Zip
560 MINERA Business Phone No.	L SPRING AVENUE	5. State of Incorporation	PAWTUCKET	R.I.	02860 6. SIC Gode
	Character of Business Conducted in Rh				
	ALL TYPES OF CA				
. NAMES AND AI esident Name	DRESSES OF THE OFFICE	RS (*X* BOX FOR ATTAC	HMENT) FILL IN SPACES Vice President Name	BEFORE USING ATTACH	MENTS
FERDINANDO	G. MONIZ		FERDINANDO (G. MONIZ	
9 WOODSIDE	AVENUE		9 WOODSIDE A	VENUE	
ity	State R.I.	Zip	City	State	Zip
CUMBERLAND	R.1.	02864	CUMBERLAND Trensurer Name	R.I.	.02864
FERDINANDO			Street Address		
9 WOODSIDE	AVENUE		:		
CUMBERLAND	State R.I.	^{7.1} p 02864	City	State	Zip
. NAMES AND AL	DRESSES OF THE DIRECT	ORS (*X* BOX FOR ATT)	ACHMENT) FILL IN SPACE Director Name	ES BEFORE USING ATTAC	HMENTS
FERDINANDO	G. MONIZ		FERDINANDO G	. MONIZ	
9 WOODSIDE	AVENUE	Zip	9 WOODSIDE A	VENUE State	71-
ty	State		•		Zip
	• -	02864	CUMBERLAND Director Name	R.I.	02864
o CUMBERLAND	R.I.	•			•
ty CUMBERLAND rector Name FERDINANDO	R.I.	•	Director Name FERDINANDO G Street Address	. MONIZ	•
ty CUMBERLAND frector Name FERDINANDO freet Address	R.I.	•	Director Name FERDINANDO G	. MONIZ	•
CUMBERLAND rector Name FERDINANDO rect Address 9 WOODSIDE ty CUMBERLAND	R.I. G. MONIZ AVENUE State	02864 ^{Zip} 02864	Director Name FERDINANDO G Street Address 9 WOODSIDE As City CUMBERLAND 11. SHARES ISSUED (**)	. MONIZ VENUE	02864
CUMBERLAND FERDINANDO FERDINANDO FERDINANDO FOR Address WOODSIDE TO CUMBERLAND SHARES AUTHO	R.I. G. MONIZ AVENUE State R.I. DRIZED ("X" BOX FOR ATTACHS	02864 ^{Zip} 02864	Director Name FERDINANDO G Street Address 9 WOODSIDE A' City CUMBERLAND	. MONIZ VENUE State R.I.	02864 zıp



File Date:	3.4.02	
Check No.:	1035	
8)	2.	
	OF STATE USE ONLY	

Under pena	ilty of perfury, I decl	are and affirm that I	have examined
this report,	including any accon	npanying schedules a	and statements, and
	ements contained he		
40 0	1. 2161	P. 14	1/4-

Heidmanler Signature of Officer	y. Misse	Esesident	3/4/02
Signature of Officer	7	Date	-/-//
Topp- 14. 1	0 44	' -	

FERDINANDO	Q. MONIZ	
Print or Type Name of Office	'er	
1) • ^ •		

Form 630 12/01

Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

2. Name of Corporation

114135

T & C Woodworking,

3. Street Address Principal Business Office

City

Pawtucket

Zip

560 Mineral Spring Avenue

S. State of Incorporation

RI

02860 6. SIC Code

(401) 265-6846

RHODE ISLAND

7. Brief Description of the Character of Business Conducted in Rhode Island

To	perform	all	types	of	carpentry	worl

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS . Vice President Name

President Name

Ferdinando: G. Moniz

Street Address

560 Mineral Spring Avenue

RI

Pawtucket

^{Zip}02860

City

Street Address

State

Zip

Secretary Name

Ferdinando G. Moniz

Street Address

560 Mineral Spring Avenue

Zip

Ferdinando G. Moniz

Treasurer Name

560 Mineral Spring Avenue

Pawtucket

RI

02860

Pawtucket

02860

RT 9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Director Name

Street Address

City

City

State

ZIp

Street Address

State

Zip

Director Name Director Name

Street Address

State

Zip

City

State

Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES

600 NO PAR VALUE

FOR SECRETARY OF STATE USE ONLY

Number of Shares

Closs/Series

Par Value

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES

Street Address

Number of Shares

Class/Serles

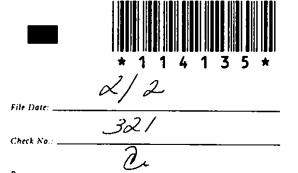
Par Value

100

common

no par

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Ferdinando G.

Print or Type Name of Officer

President

Title of Officer